

SEMINOLE COUNTY GOVERNMENT AGENDA MEMORANDUM

SUBJECT: 2009 Independent Softball Association Tournaments Agreement

DEPARTMENT: Economic Development

DIVISION: Tourism Development

AUTHORIZED BY: William McDermott

CONTACT: Fran Sullivan

EXT: 2906

MOTION/RECOMMENDATION:

Approve and authorize the Chairman to execute an agreement with Orlando-Cocoa ISA for the 2009 ISA Softball Tournaments in the amount of \$9,000.00

County-wide

William McDermott

BACKGROUND:

Orlando-Cocoa ISA has had a successful history of staging regional and national events in Seminole County since 1999, and has received TDC funding since 2003. In FY 2007-08, the Tourist Development Council recommended funding up to \$17,000 for five (5) events. The County's actual expenditure was \$4,500 for two (2) events, which generated 186 room nights and total economic impact of \$164,664.

Funds will be used to place the bid guarantee for two (2) events to be held at the Seminole County Softball Complex. Each event is two days in length. Orlando-Cocoa ISA estimates a minimum of 400 room nights from two events, with estimated total direct economic impact of \$357,050.

The Tourist Development Council supports this expenditure, and funds are appropriated in Tourism Development's FY 2008-09 promotional budget.

STAFF RECOMMENDATION:

Staff recommends that the Board approve and authorize the Chairman to execute an agreement with Orlando-Cocoa ISA for the 2009 ISA Softball Tournaments in the amount of \$9,000.00.

ATTACHMENTS:

1. Agreement

Additionally Reviewed By:

- ☒ Budget Review (Angela Singleton, Lisa Spriggs)
- ☒ County Attorney Review (Ann Colby)

2009 INDEPENDENT SOFTBALL ASSOCIATION TOURNAMENTS AGREEMENT

THIS AGREEMENT is made and entered this _____ day of _____, 20____, by and between **SEMINOLE COUNTY**, a political subdivision of the State of Florida, whose address is Seminole County Services Building, 1101 East First Street, Sanford, Florida 32771, hereinafter referred to as "COUNTY", and **ORLANDO-COCOA ISA**, whose address is 1035 Kerwood Circle, Oviedo, Florida 32765, hereinafter referred to as the "ORLANDO-COCOA".

W I T N E S S E T H:

WHEREAS, the Florida State Legislature enacted Section 125.0104, Florida Statutes, known as the Local Option Tourist Development Act in response to the growing need of Florida counties to provide additional revenue sources for tourist development to stimulate the local economy; and

WHEREAS, Section 125.0104, Florida Statutes, provides that Tourist Development Tax Revenues may be used to acquire, construct, extend, enlarge, remodel, repair, improve, maintain, operate or promote publicly owned or operated convention centers, sports stadiums, sports arenas, coliseums or auditoriums within the boundaries of the COUNTY's special taxing district in which the tax is levied; and

WHEREAS, the voters of Seminole County approved by referendum the imposition of the Tourist Development Tax on transient rental accommodations in Seminole County; and

WHEREAS, the COUNTY, in coordination with the Tourist Development Council, wishes to appropriate Tourist Development Tax Revenues as operational funds to host ISA Softball Tournaments to be held at the Seminole County Softball Complex Stadium on July 18-19 and August 29-30, 2009; and

WHEREAS, the COUNTY desires to reimburse ORLANDO-COCOA for the tournament guarantee placed with the Independent Softball Association to

secure these Tournaments for the Stadium,

NOW, THEREFORE, in consideration of the mutual understandings and agreements set forth herein, the COUNTY and ORLANDO-COCOA agree as follows:

Section 1. Term. The term of this Agreement is the date it is executed by the parties through September 30, 2009.

Section 2. Termination. This Agreement may be terminated by either party at any time, with or without cause, upon not less than thirty (30) days written notice to the other party as provided for herein or, at the option of the COUNTY, immediately in the event that ORLANDO-COCOA fails to fulfill any of the terms, understandings or covenants of this Agreement. The COUNTY shall not be obligated to pay for any services provided or costs incurred by ORLANDO-COCOA after ORLANDO-COCOA has received notice of termination. Upon said termination, ORLANDO-COCOA shall immediately refund to the COUNTY, or otherwise utilize as the COUNTY directs, any unused funds provided hereunder.

Section 3. Services.

(a) ORLANDO-COCOA shall submit written proof to the COUNTY that the amount requested was in fact paid to the ISA as bid fees for Tournaments as listed in Exhibit "A".

(b) All promotional packages sent out by ORLANDO-COCOA for the Tournaments, as listed in Exhibit "A", must contain a list of Seminole County hotels provided by the Seminole County Convention and Visitors Bureau. No other hotel list may be included in the promotional packet.

All such promotional packets must be approved by the COUNTY prior to distribution in order to qualify for reimbursement of the bid fee for the event promoted.

(c) ORLANDO-COCOA shall permit a third-party company, as designated by the COUNTY, to conduct on-site surveys during the ISA Softball Tournaments to coordinate the survey process. ORLANDO-COCOA

shall cooperate in making their Tournament accessible in whatever manner necessary for completion of the survey.

(d) After-Event preliminary statistics for room nights and economic impact must be submitted to the COUNTY no later than thirty (30) days after the Event.

(e) ORLANDO-COCOA shall be required to have and maintain a website for the purpose of promoting tourism to and attendance at ORLANDO-COCOA's Tournaments. Said website shall be linked to the Seminole County Tourism website (www.visitseminole.com) and such link shall be maintained throughout the duration of this Agreement.

(f) Failure to comply with or failure to meet the requirements of this Section, including time deadlines, shall result in termination of this Agreement and forfeiture of the bid fee reimbursement rendered to ORLANDO-COCOA by the COUNTY pursuant to this Agreement.

Section 4. Liability and Insurance.

(a) **Liability.** COUNTY, its Commissioners, officers, employees and agents shall not be deemed to assume any liability for the acts, omissions and negligence of ORLANDO-COCOA, its officers, employees and agents in the performance of services provided hereunder

(b) **Insurance.**

(1) ORLANDO-COCOA shall furnish the COUNTY with a Certificate of Insurance signed by an authorized representative of the insurer evidencing the insurance required by this Section (Commercial General Liability). The COUNTY, its officials, officers and employees shall be named additional insured under the Commercial General Liability policy. The Certificate of Insurance shall provide that the COUNTY shall be given not less than thirty (30) days written notice prior to the cancellation or restriction of coverage. Until such time as the insurance is no longer required to be maintained by ORLANDO-COCOA, ORLANDO-COCOA shall provide the COUNTY with a renewal or replacement

Certificate of Insurance not less than thirty (30) days before expiration or replacement of the insurance for which a previous certificate has been provided.

(2) The Certificate of Insurance shall contain a statement that it is being provided in accordance with this Agreement and that the insurance is in full compliance with the requirements of this Agreement. In lieu of the statement on the Certificate, ORLANDO-COCOA shall, at the option of the COUNTY, submit a sworn, notarized statement from an authorized representative of the insurer that the Certificate is being provided in accordance with this Agreement and that the insurance is in full compliance with the requirements of this Agreement.

(3) In addition to providing the Certificate of Insurance, if required by the COUNTY, ORLANDO-COCOA shall, within thirty (30) days after receipt of the request, provide the COUNTY with a certified copy of each of the policies of insurance providing the coverage required by this Section.



(4) Neither approval by the COUNTY nor failure to disapprove the insurance furnished by ORLANDO-COCOA shall relieve ORLANDO-COCOA of ORLANDO-COCOA's full responsibility for performance of any obligation including ORLANDO-COCOA's indemnification of COUNTY under this Agreement.

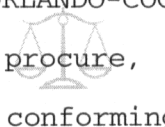
(5) Insurance Company Requirements. Insurance companies providing the insurance under this Agreement must meet the following requirements:

(A) Companies issuing policies must be authorized to conduct business in the State of Florida and prove same by maintaining Certificates of Authority issued to the companies by the Department of Insurance of the State of Florida.

(B) In addition, such companies other than those authorized by Section 624.4621, Florida Statutes, shall have and

maintain a Best's Rating of "A-" or better and a Financial Size Category of "VII" or better according to A.M. Best Company.

(C) If, during the period which an insurance company is providing the insurance coverage required by this Agreement, an insurance company shall: 1) lose its Certificate of Authority, or 2) fail to maintain the requisite Best's Rating and Financial Size Category, ORLANDO-COCOA shall, as soon as ORLANDO-COCOA has knowledge of any such circumstance, immediately notify the COUNTY and immediately replace the insurance coverage provided by the insurance company with a different insurance company meeting the requirements of this Agreement. Until such time as ORLANDO-COCOA has replaced the unacceptable insurer with an insurer acceptable to the COUNTY, ORLANDO-COCOA shall be deemed to be in default of this Agreement.

(6) Specifications. Without limiting any of the other obligations or liability of ORLANDO-COCOA, ORLANDO-COCOA shall, at ORLANDO-COCOA's sole expense,  procure, maintain and keep in force amounts and types of insurance conforming to the minimum requirements set forth in this Section. Except as otherwise specified in this Agreement, the insurance shall become effective prior to the commencement of the Event and shall be maintained in force until this Agreement completion date. The amounts and types of insurance shall conform to the following minimum requirements.

(A) Commercial General Liability.

(i) ORLANDO-COCOA's insurance shall cover ORLANDO-COCOA for those sources of liability which would be covered by the latest edition of the standard Commercial General Liability Coverage Form (ISO Form CG 00 01), as filed for use in the State of Florida by the Insurance Services Office, without the attachment of restrictive endorsements other than the elimination of Coverage C, Medical Payment, and the elimination of coverage for Fire Damage Legal Liability.

(ii) The minimum limits to be maintained by ORLANDO-COCOA (inclusive of any amounts provided by an Umbrella or Excess policy) shall be as follows:

	<u>LIMITS</u>
General Aggregate	Three (3) Times the Each Occurrence Limit
Personal & Advertising Injury Limit	\$1,000,000.00
Each Occurrence Limit	\$1,000,000.00

(7) Coverage. The insurance provided by ORLANDO-COCOA pursuant to this Agreement shall apply on a primary basis and any other insurance or self-insurance maintained by the COUNTY or the COUNTY's officials, officers or employees shall be excess of and not contributing with the insurance provided by or on behalf of ORLANDO-COCOA.

(8) Occurrence Basis. The Commercial General Liability required by this Agreement shall be provided on an occurrence rather than a claims-made basis.

Section 5. Billing and Payment. The COUNTY hereby agrees to reimburse ORLANDO-COCOA up to a maximum sum of NINE THOUSAND AND NO/100 DOLLARS (\$9,000.00) for placement of the tournament bid fees for the Tournaments listed in Exhibit "A" to this Agreement. Said funds are reimbursable upon:

(a) Receipt by the COUNTY of a Request for Funds Form, attached hereto and incorporated herein as Exhibit "B", from ORLANDO-COCOA requesting all or part of the above amount. The Request for Funds Form shall be completed properly and documentation attached including original or copies of invoices and copies of cancelled checks. Such request by ORLANDO-COCOA shall only be for the bids specifically provided for herein. Said Request for Funds Form shall be submitted no later than ninety (90) days after the final event. Failure to comply with this requirement shall result in termination of this Agreement and forfeiture of all financial assistance granted to ORLANDO-COCOA pursuant

to this Agreement.

(b) Verification by the Seminole County Economic Development/Tourism Director that ORLANDO-COCOA has placed the bid for which reimbursement is sought and has complied with all provision of this Agreement including reporting requirements;

(c) Payment requests shall be sent to:

Original: Director
Seminole County Economic Development/Tourism
1230 Douglas Avenue, Suite 116
Longwood, Florida 32779

Duplicate: Director, Department of Finance
Seminole County Services Building
1101 East First Street
Sanford, Florida 32771

(d) The Request for Funds Form shall be accompanied by a detailed report of the economic impact on the COUNTY resulting from the Event, funds for which have been provided hereunder. Such report, attached hereto and incorporated herein as Exhibit C, shall include, but not be limited to, the actual number of hotel or motel rooms occupied, restaurant meals consumed and estimated goods and services expenditures.

(e) ORLANDO-COCOA is responsible for documenting the number of room nights actually utilized per event at each Seminole County hotel. ORLANDO-COCOA must have each hotel individually certify the actual number of rooms picked up by having the General Manager complete the Hotel Room Pickup Form, attached hereto and incorporated herein as Exhibit D. No payments will be processed until all required documentation has been submitted. COUNTY reserves the right to reduce the amount of reimbursement paid to ORLANDO-COCOA under this Agreement in the event the guaranteed room nights are not satisfied.

(f) Reimbursement shall be contingent upon ORLANDO-COCOA's compliance with requirements as stated in Exhibit A.

Section 6. Reporting Requirements. In the performance of this Agreement, ORLANDO-COCOA shall maintain books, records and accounts of

all activities in compliance with normal accounting procedures. Each Request for Funds Form shall detail costs incurred as referenced in Exhibit A. ORLANDO-COCOA shall transmit and certify interim records with each Request for Funds Form submitted to the COUNTY.

Section 7. Non-Allowable Costs. The purpose for which Tourist Development Tax grant funds are provided to ORLANDO-COCOA shall not duplicate programs for which monies have been received, committed or applied for from another source. The monies provided hereunder shall be expended only for the activities or purposes set forth in Exhibit A. Non-reimbursable expenditures include, but are not limited to, legal, engineering, accounting, auditing, planning, feasibility studies or consulting services, real property or capital improvements, interest reduction in deficits and liens, prize money, scholarships, awards, plaques or certificates, private entertainment, lodging, food and beverages, and wages, salaries, administrative or travel expenses other than those appearing, if any, in Exhibit A.

Section 8. Unavailability of Funds. ORLANDO-COCOA acknowledges that Tourist Development Tax revenues are the source of funding for this Agreement and that no other COUNTY revenues shall or may be utilized to meet the COUNTY's obligations hereunder. If, for whatever reason, the funds pledged by the COUNTY to this program should become unavailable, this Agreement may be terminated immediately, at the option of the COUNTY, by written notice of termination to ORLANDO-COCOA as provided hereinafter. The COUNTY shall not be obligated to pay for any services provided or costs incurred by ORLANDO-COCOA after ORLANDO-COCOA has received such notice of termination. In the event there are any unused COUNTY funds, ORLANDO-COCOA shall promptly refund those funds to the COUNTY or otherwise use such funds as the COUNTY directs.

Section 9. Access to Records. ORLANDO-COCOA shall allow the COUNTY, its duly authorized agent and the public access to such of

ORLANDO-COCOA's records as are pertinent to all services provided hereunder at reasonable times and under reasonable conditions for inspection and examination in accordance with Florida Statutes.

Section 10. Liaison. ORLANDO-COCOA shall submit the original copies of the Request for Funds Forms, the Narrative Progress Report Form and any other required reports or correspondence to the following:

Director
Seminole County Economic Development/Tourism
1230 Douglas Avenue, Suite 116
Longwood, Florida 32779

Section 11. Notices. Whenever either party desires to give notice unto the other, it shall be given in writing by certified United States mail, with return receipt requested, and sent to:

For COUNTY:

Director
Seminole County Economic Development/Tourism
1230 Douglas Avenue, Suite 116
Longwood, Florida 32779

For ORLANDO-COCOA:

David Santiago
Orlando-Cocoa ISA
1035 Kerwood Circle
Oviedo, Florida 32765



Either of the parties may change, by written notice as provided above, the person or address for receipt of notice.

Section 12. Assignments. Neither party to this Agreement shall assign this Agreement nor any interest arising herein without the written consent of the other.

Section 13. Entire Agreement.

(a) It is understood and agreed that the entire agreement of the parties is contained herein and that this Agreement supersedes all oral agreements and negotiations between the parties relating to the subject matter hereof as well as any previous agreements presently in effect between the parties relating to the subject matter hereof.

(b) Any alterations, amendments, deletions or waivers of the provisions of this Agreement shall be valid only when expressed in writing and duly signed by the parties.

Section 14. Compliance with Laws and Regulations. In providing all services pursuant to this Agreement, ORLANDO-COCOA shall abide by all statutes, ordinances, rules and regulations pertaining to or regulating the provisions of such services including those now in effect and hereafter adopted. Any violation of said statutes, ordinances, rules or regulations shall constitute a material breach of this Agreement and shall entitle the COUNTY to terminate this Agreement immediately upon delivery of written notice of termination to ORLANDO-COCOA as provided hereinabove.

Section 15. Conflict of Interest.

(a) ORLANDO-COCOA agrees that it will not engage in any action that would create a conflict of interest in the performance of its obligations pursuant to this Agreement with the COUNTY or which would violate or cause others to violate the provisions of Part III, Chapter 112, Florida Statutes, relating to ethics in government.


(b) ORLANDO-COCOA hereby certifies that no officer, agent or employee of the COUNTY has any material interest (as defined in Section 112.312(15), Florida Statutes, as over 5%) either directly or indirectly in the business of ORLANDO-COCOA to be conducted here and that no such person shall have any such interest at any time during the term of this Agreement.

(c) Pursuant to Section 216.347, Florida Statutes, ORLANDO-COCOA hereby agrees that monies received from the COUNTY pursuant to this Agreement will not be used for the purpose of lobbying the Legislature or any other State or Federal agency.

(Signature Page Follows)

IN WITNESS WHEREOF, the parties to this Agreement have caused their names to be affixed hereto by the proper officers thereof for the purposes herein expressed on the day and year first above written.

ATTEST:



, Secretary

ORLANDO COCOA ISA

By: 

DON STRATTON
Chief Corporate Officer

Date: 5-26-09

ATTEST:

BOARD OF COUNTY COMMISSIONERS
SEMINOLE COUNTY, FLORIDA

MARYANNE MORSE
Clerk to the Board of
County Commissioners of
Seminole County, Florida.

By: _____
BOB DALLARI, Chairman

Date: _____

For the use and reliance
of Seminole County only.

Approved as to form and
Legal sufficiency.

As authorized for execution
by the Board of County Commissioners
at their _____, 20____
regular meeting.

County Attorney

AEC/sjs

5/18/09

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Attachments:

- Exhibit "A" - Project Description and Expenses
- Exhibit "B" - Request For Funds Form
- Exhibit "C" - Economic Impact Report Form
- Exhibit "D" - Hotel Room Pickup Form

EXHIBIT A

PART II APPLICATION FOR FUNDS
TOURIST DEVELOPMENT SPONSORSHIP
FY 2008-09

- (1) NAME OF ORGANIZATION Orlando-Cocoa ISA
- (2) NAME OF EVENT Independent Softball Association Softball Tournaments
- (3) CONTACT PERSON David Santiago
- (4) CONTACT PERSON E-MAIL isadavid45@aol.com
- (5) COMPLETE ADDRESS OF ORGANIZATION: Independent Softball Association

STREET 1035 Kerwood Circle

CITY Oviedo ST FL ZIP 32765

PHONE: 407-971-8502 CELL: 407-427-4722 FAX:

- (6) ORGANIZATION'S CHIEF OFFICIAL: David Santiago

TITLE: Florida State Director Address if different from above:

(same as above)

- (7) INTENDED USE OF FUNDS: (Refer to Pages 6-7 - Authorized/Unauthorized Uses of Funds) Bid Guarantee
- (8) AMOUNT REQUESTED \$ 9,000 (for 2 events)
- (9) IF ENTIRE REQUEST CANNOT BE FUNDED, CAN THE EVENT BE RESTRUCTURED FOR LESS FUNDING? () YES (X) NO

II DETAILS ON YOUR ORGANIZATION:

In narrative form please describe your organization in the following areas. **Use a separate sheet to complete these questions in detail.**

(1) What are your organization's goals and objectives?

The ISA was founded in 1982 in Shelbyville, Tennessee, by Larry Nash. ISA is one of four (4) major governing bodies of amateur softball in America. ISA organizes and sanctions competitive participation in various formats and classifications thought league and tournament place.

ISA's popularity has grown steadily throughout its history, with current registrations in excess of 15,000 teams, 2,000 umpires and a network in excess of 350 directors covering over 25 states, Canada and Mexico.

(2) What services does your organization provide?

Orlando-Cocoa ISA provides event management services for ISA (Independent Softball Association) Tournaments and Events.

(3) How will your organization monitor expenditure of funds?

David Santiago, Director, will monitor the expenditure of any funds awarded to the ISA Softball Championship events staged in Seminole County. In addition, Orlando-Cocoa ISA will adhere to the Tourist Development Request for Sponsorship Funds application in the expense of funds consistent with the terms of the agreement developed by Seminole County Government.

(4) How will your event bring additional visitors and hotel room nights to Seminole County?

Orlando-Cocoa ISA, with assistance from the Central Florida Sports Commission, will develop a comprehensive registration package with information on local attractions, entertainment options and hotels in the area to attract teams and spectators to Seminole County from across the United States.

(5) What is your organization's experience in managing sponsorships and grants?

Orlando-Cocoa ISA has received funding from the Seminole County Tourism Development Council since 2002 for numerous events staged within the county. In 2008, Orlando-Cocoa ISA was awarded a \$17,000 grant to stage several ISA Softball Championship events in Seminole County.

III EVENT INFORMATION (Use additional sheets where necessary.)

- (1) EVENT NAME: Independent Softball Association Softball Tournaments
- (2) TYPE OF EVENT: Adult & Youth Softball
- (3) DATE OF EVENT: 7/18-7/19 8/29-8/30
- (4) NUMBER OF DAYS: 2 days (Each Event) HOURS: FROM: 8 AM TO: 10 PM

(5) EVENT PROMOTER (IF OTHER THAN YOUR ORGANIZATION)

NAME OF PROMOTER Orlando-Cocoa ISA
COMPANY NAME David Santiago
ADDRESS: 1035 Kerwood Circle, Oviedo, FL 32765
PHONE and FAX (407) 427-4722 Fax(407)971-8507

- (6) PROJECTED NUMBER OF LOCAL PARTICIPANTS,
GUESTS AND MEDIA 345
- (7) PROJECTED NUMBER OF OUT-OF-COUNTY PARTICIPANTS: 845
AVERAGE NUMBER OF DAYS STAY IN SEMINOLE COUNTY: 2 Days
- (8) PROJECTED NUMBER OF OUT-OF-COUNTY GUESTS OF PARTICIPANTS: 690
AVERAGE NUMBER OF DAYS STAY IN SEMINOLE COUNTY: 2 Days
- (9) PROJECTED NUMBER OF OUT-OF-COUNTY MEDIA/ Officials: 10
AVERAGE NUMBER OF DAYS STAY IN SEMINOLE COUNTY: 2 days

- (10) PROVIDE THE ESTIMATED DIRECT ECONOMIC IMPACT ON SEMINOLE COUNTY FROM YOUR
EVENT (The Eco Impact form for the application can be found on the website):
\$ 357,050.00

- (11) WHAT IS THE **GUARENTEED MINIMUM** NUMBER OF ROOM NIGHTS YOUR EVENT WILL
BRING TO SEMINOLE COUNTY? 400 (Over the course of 2 events)
**Note: This number is the minimum number of rooms that must be captured by the event and documented
by submitting the Room Night Pick-Up Form (Exhibit D) within 90 days of the conclusion of the event.
Failure to meet this minimum room night guarantee, the total amount of grant disbursement will be
decided by the Seminole County CVB.**

- (12) PROVIDE A LIST OF OTHER EVENT SPONSORS AND THE AMOUNT(S) OF THEIR
SPONSORSHIPS.

1. *See Below

- (13) PROVIDE THE LOCATION, CONTACT NAME AND PHONE NUMBER FOR THE EVENT FOR THE

LAST THREE YEARS.

Don Stratton – Executive Director
863-519-7127

Locations: 2008- Auburndale, FL
2007- Ft. Lauderdale, FL
2006- Orlando, FL

(14) PLEASE PROVIDE DETAILS OF HOW THE EVENT WILL WORK.

Saturday- Play from 8:00am-10:00pm
Sunday- Play from 8:00am – 4:00pm

IV SPORTING EVENT (If Applicable)

(1) NAME OF SPORT/EVENT: Independent Softball Association Softball Tournaments

(2) LOCATION OF EVENT: (IF MORE THAN ONE, LIST ON SEPARATE SHEET.)

Seminole County Softball Complex

(3) TOTAL NUMBER OF FIELDS NEEDED: 5 each tournament

(4) TOTAL NUMBER OF FIELDS NEEDED PER DAY: 5 each tournament

(5) NUMBER OF LIGHTED FIELDS REQUIRED: 5

(6) PROVIDE FIELD USE TIMES BY DAY. 8 am – 10 pm

(6) SPECIAL FIELD REQUIREMENTS (PLEASE SPECIFY):

None

V OTHER OUTDOOR EVENT:

(1) LOCATION AND SIZE OF EVENT VENUE:

Seminole Softball Complex – Varies Per Event

(2) SPECIAL SITE REQUIREMENTS: (none)

EVENT BUDGET SUMMARY

INCOME SOURCES:

TOURIST DEVELOPMENT TAX REQUEST \$ 9,000

ADDITIONAL FUNDING SOURCES (Seminole County cannot be sole source.)

Easton/ Mizuno / 3-n-2 \$ 18,000

ADStarr \$ 3,500

_____ \$ _____

TOTAL ADDITIONAL FUNDS	\$ <u>\$21,500</u>
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OTHER INCOME SOURCES

Sanction Fee's \$ 1,000

<u>Team Fee's</u>	\$ 25,000
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Merchandise	\$ 1,500
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_____ \$ _____

_____ \$ _____

TOTAL OTHER INCOME	\$ 27,500.00
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TOTAL INCOME ALL SOURCES \$ 58,000.00

EVENT EXPENSES:

Provide an itemized summary indicating the intended use of TDC funds. Please be as explicit as possible, including intended publications, promotional materials, etc. and how much money will be expended (tentatively) for each category. Use additional sheets if necessary.

Intended Utilization of Tourist Tax Funds

(Please refer to authorized and unauthorized uses on page 6-7)

Bid Fee _____

Total Tourism Funds:

\$ 9,000

Other Event Expenses:

Site Fees - \$6,000.00

Officials - \$18,800.00

Awards - \$15,000.00

Sanction Fees \$1,000.00

Marketing/Promotion - \$2,800.00

Administrative Cost - \$3,000.00

Hospitality – \$2,000

Total Projected Event Expenses: 57,600

CERTIFICATION

I have reviewed this Application for Funds from the Tourist Development Council for FY 2008-09. I am in full agreement with the information contained herein. To the best of my knowledge, the information contained in this Application and its attachments is accurate and complete.



Chief Corporate Officer

4/16/09

Date

Seal




Corporation Secretary

4/16/09

Date

EXHIBIT "B"
REQUEST FOR FUNDS

SEMINOLE COUNTY TOURISM DEVELOPMENT
1230 DOUGLAS AVENUE, #116, LONGWOOD FL 32779

EVENT NAME _____

ORGANIZATION _____

STREET ADDRESS _____

CITY _____ STATE _____ ZIP _____

NAME OF CONTACT _____ CONTACT TELEPHONE _____

CONTACT E-MAIL _____

EVENT DATE FROM _____ TO _____

REQUEST # _____

() INTERIM REPORT () FINAL REPORT

TOTAL CONTRACT AMOUNT \$ _____

<u>EXPENSE</u>	<u>BUDGET</u>	<u>REIMBURSEMENT REQUESTED</u>
_____	_____	_____
_____	_____	_____
TOTALS	_____	_____

(For Final Report only)
Please complete the following:

#of Hotels used _____

#of Hotel room nights _____

#of out-of-town participants _____

#of out-of-town fans _____

#of out-of-town media _____

Total direct economic impact \$ _____

NOTE: Furnishing false information may constitute a violation of applicable State and Federal laws.

CERTIFICATION OF FINANCIAL OFFICER: I certify that the above information is correct based on our official accounting system and records, consistently applied and maintained and that the cost shown have been made for the purpose of and in accordance with, the terms of the contract. The funds requested are for reimbursement of actual cost made during this time period.

SIGNATURE _____ TITLE _____

**Exhibit C
Seminole County - Economic Impact**

	Quantity	Multiplier	Event days	TOTALS
How much will event organizers spend locally?				
How many adult out-of state participant/spectator days are expected?	\$	143.00		\$ -
How many youth out-of state participant/spectator days are expected?	\$	72.00		\$ -
How many adult in-state participant/spectator days are expected?	\$	125.00		\$ -
How many youth in-state participant/spectator days are expected?	\$	63.00		\$ -
How many out-of state media/professionals days are expected?	\$	143.00		\$ -
How many in state media/ professionals expected?	\$	125.00		\$ -
What is the expected event-site spending?				
What other expenditures, if any, are anticipated?				
TOTAL DIRECT IMPACT =				\$ -
	Direct Impact	Divider	Multiplier	
Total output economic impact:	\$ -		1.5	\$ -
Total earnings impact:	\$ -		0.57	\$ -
Total employment impact:	\$ -	1,000,000	22	\$ -
		Non-Taxable		
	Direct Impact	Sales	Sales Tax Rate	
STATE SALES TAX GENERATED:	\$ -		0.06	\$ -
			Florida DOR	
		State Sales Tax	Disbursement	
		Generated	Multiplier	
STATE SALES TAX REIMBURSED TO COUNTY:	\$	-	0.09653	\$ -
		Non-Taxable	Option Sales	
	Direct Impact	Sales	Tax Rate	
COUNTY LOCAL OPTION SALES TAX:	\$ -	\$	0.01	\$ -
	Estimated Rooms	Approximate Hotel	Average Room	
	Per Night To Be Secured	Rooms Secured	Rate Per Night	
TOTAL HOTEL IMPACT:				\$ -
	Total Hotel			
	Impact		Resort Tax Rate	
COUNTY RESORT TAX RECOUPED:	\$ -		0.05	\$ -
TOTAL RESORT TAX & STATE SALES TAX RECOUPED BY COUNTY:				\$ -
RENTAL COSTS OF FACILITIES OWNED & RECOUPED BY THE COUNTY:				\$ -
RENTAL COSTS OF FACILITIES OWNED & RECOUPED BY THE CITY:				\$ -
BID FEES AND COSTS ASSOCIATED TO THE EVENT PAID BY THE COUNTY:				\$ -
BID FEES AND COSTS ASSOCIATED TO THE EVENT PAID BY THE CITY:				\$ -
APPROXIMATE REVENUE RECOUPED BY THE COUNTY ON THE EVENT:				\$ -

	Quantity	Multiplier	Event days	TOTALS
How much will event organizers spend locally?				\$ 8,000.00
How many adult out-of state participant/spectator days expected?		\$ 143.00	2	\$ -
How many youth out-of state participant/spectator days are expected?		\$ 72.00	2	\$ -
How many adult in-state participant/spectator days expected?	1235	\$ 125.00	2	\$ 308,750.00
How many youth in-state participant/spectator days are expected?	300	\$ 63.00	2	\$ 37,800.00
How many out-of state media/professionals days expected?		\$ 143.00	2	\$ -
How many in state media/ professionals expected?	10	\$ 125.00	2	\$ 2,500.00
What is the expected event-site spending?				
What other expenditures, if any, are anticipated?				
TOTAL DIRECT IMPACT =				\$ 357,050.00
	Direct Impact	Divider	Multiplier	
Total output economic impact:	\$ 357,050.00		1.5	\$ 535,575.00
Total earnings impact:	\$ 357,050.00		0.57	\$ 203,518.50
Total employment impact:	\$ 357,050.00	1,000,000	22	7.86
		Non-Taxable		
	Direct Impact	Sales	Sales Tax Rate	
STATE SALES TAX GENERATED:	\$ 357,050.00		0.06	\$ 21,423.00
			Florida DOR	
		State Sales Tax	Disbursement	
		Generated	Multiplier	
STATE SALES TAX REIMBURSED TO COUNTY:		\$ 21,423.00	0.09653	\$ 2,067.96
		Non-Taxable	Option Sales	
	Direct Impact	Sales	Tax Rate	
COUNTY LOCAL OPTION SALES TAX:	\$ 357,050.00	\$ -	0.01	\$ 3,570.50
	Estimated Rooms	Approximate Hotel	Average Room	
	Per Night To Be Secured	Rooms Secured	Rate Per Night	
TOTAL HOTEL IMPACT:	350	700	\$79.00	\$ 55,300.00
	Total Hotel			
	Impact		Resort Tax Rate	
COUNTY RESORT TAX RECOUPED:	\$ 55,300.00		0.05	\$ 2,765.00
TOTAL RESORT TAX & STATE SALES TAX RECOUPED BY COUNTY:				\$ 8,403.46
RENTAL COSTS OF FACILITIES OWNED & RECOUPED BY THE COUNTY:				\$ -
RENTAL COSTS OF FACILITIES OWNED & RECOUPED BY THE CITY:				\$ -
BID FEES AND COSTS ASSOCIATED TO THE EVENT PAID BY THE COUNTY:				\$ -
BID FEES AND COSTS ASSOCIATED TO THE EVENT PAID BY THE CITY:				\$ -
APPROXIMATE REVENUE RECOUPED BY THE COUNTY ON THE EVENT:				\$ 8,403.46



Exhibit D

SEMINOLE COUNTY CONVENTION & VISITORS BUREAU (CVB)

ROOM NIGHT PICKUP CERTIFICATION FORM

Request for Room Night Pick-UP

Attn: General Manager, please provide the room night information for the event dates listed below **as soon as possible**:

Hotel Name/ Location: _____

Contact Person: _____ **Phone:** _____

Group Name: _____

Event Name: _____

Event Dates: _____

I certify the organization/event listed above consumed the following room nights:

Total Number of Room Nights Picked up from Events _____

GM Signature: _____

The purpose of this form is to **certify the number of local hotel room nights in Seminole County attributable to this event.**

The Seminole County CVB reserves the right to unilaterally reduce the maximum amount of any grant awarded should the applicant's room night guarantee not be satisfied or documented with this Room Night Pick Up Certification Form.

Your cooperation in completing this form is greatly appreciated. For additional information please contact Sharon Sears, CVB Executive Director at (407) 665-2901.
